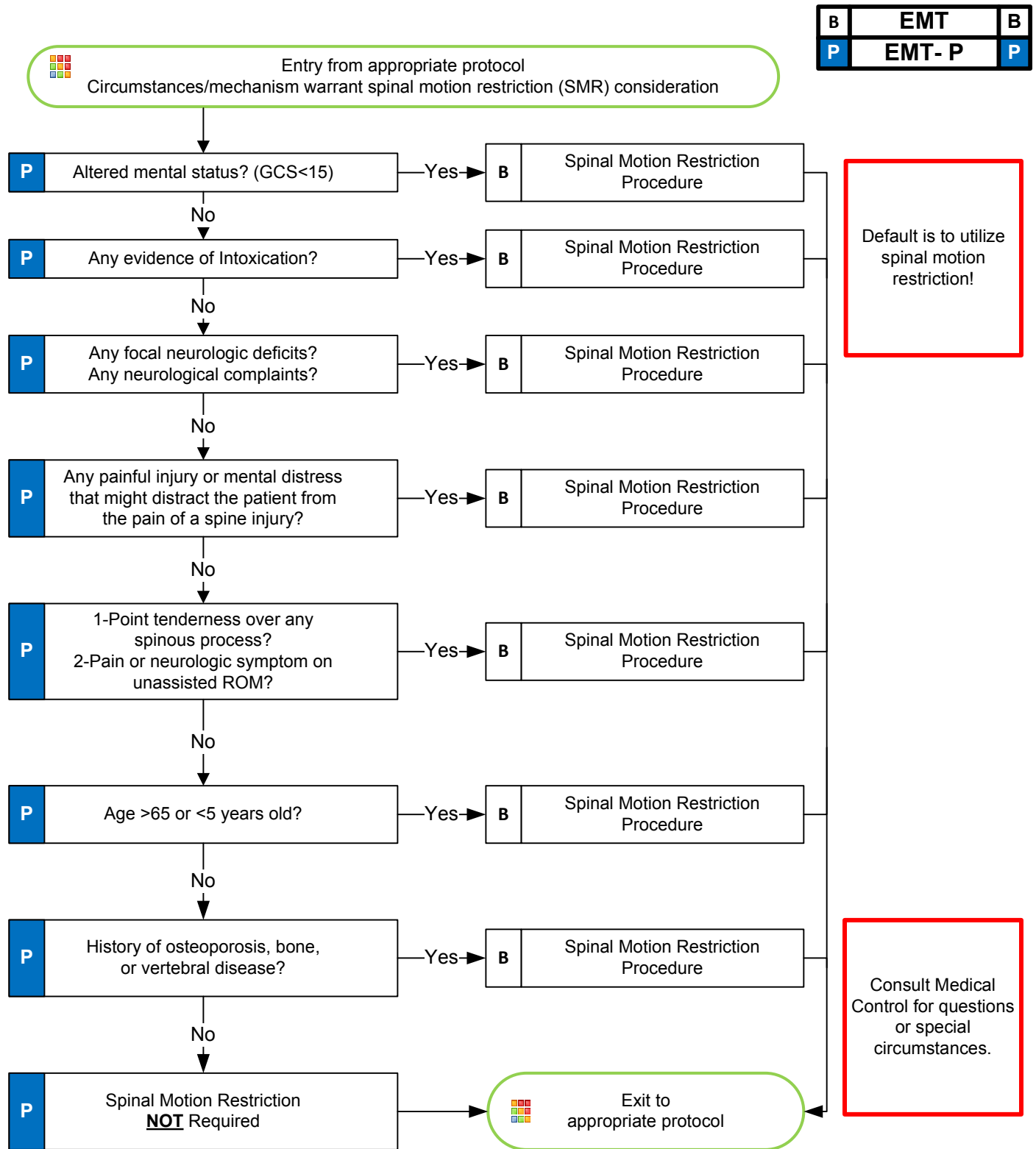


Spinal Motion Restriction Protocol



Spinal Motion Restriction Protocol

Definition

Spinal Motion Restriction (SMR) utilizes a cervical collar, the cot mattress and adequately and appropriately securing the patient in order to limit the excessive motion of the spinal column during patient transport.

Pearls

- **Recommended Exam: Mental Status, Neck, Back, Heart, Lungs, Abdomen, Extremities, Skin, Neurologic**
- In patients aged >65 or <5 years old and those with a language barrier, history may be incomplete and a normal exam may not be sufficient to rule out spinal injury.
- Examples of significant mechanisms include, but are not limited to, high-energy events such as motor vehicle ejection, abrupt deceleration crashes, rollovers, ATV/motorcycle crashes, high falls, etc. and may indicate the need for spinal motion restriction.
- Patients with penetrating trauma, i.e. GSW or stabbing, should NOT be considered for spinal motion restriction unless there is a focal neurological deficit or complaint.
- Range of motion should NOT be assessed if patient has midline spinal tenderness.
- The range of motion examination should be unassisted. The patient should be able to touch their chin to their chest, extend their neck (look up), and turn their head from side to side without spinal pain or neurologic symptoms.

Additional Information

1. Long spine boards (LSB) have both risks and benefits for patients and have not been shown to improve outcomes. The best use of the LSB may be for extrication, patient movement, or providing a firm surface for compressions during cardiac arrest. However, several other devices may be appropriate for patient extrication and movement.
2. Spinal precautions are STILL VERY IMPORTANT in patients at risk for spinal injury. Adequate spinal motion restriction may be achieved by placement of a hard cervical collar and ensuring that the patient is adequately and appropriately secured to the stretcher, ensuring minimal movement, and manual in-line stabilization during any transfers.
3. Patients presenting to KCFD on a LSB from another medical provider, i.e. first responder agency, EMS, or hospital, may be subject to the Spinal Motion Restriction Protocol and Procedure.